



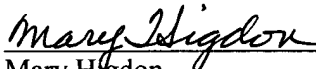
PATENT
Attorney Docket No. ICE-010

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT(S): Wight CONFIRMATION NO.: 2597
APPLICATION NO.: 09/918,106 GROUP NO.: 2819
FILING DATE: July 30, 2001 EXAMINER: Bayard, E.
TITLE: COMPUTATIONAL CIRCUITS AND METHODS FOR SIGNAL
DECONSTRUCTION/RECONSTRUCTION IN WIRELESS
TRANSCIVERS

CERTIFICATE OF FIRST CLASS MAILING UNDER 37 C.F.R. 1.8

I hereby certify that this correspondence, and any document(s) referred to as enclosed herein, is/are being deposited with the United States Postal Service as first class mail, postage prepaid, in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this 27th day of December, 2005.


Mary Higdon

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Submitted herewith is/are:

1. Transmittal Form (1 pg.);
2. Request for Withdrawal as Attorney or Agent
and Change of Correspondence Address (1 pg.); and
3. Return Receipt Postcard.

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TRANSMITTAL FORM

Application Serial Number	09/918,106
Filing Date	July 30, 2001
First Named Inventor	Wight
Group Art Unit	2819
Examiner Name	Bayard, E.
Attorney Docket No.	ICE-010 (0519220.0113)
Patent No.	
Issue Date	

ENCLOSURES (check all that apply)

- | | | |
|---|---|---|
| <input type="checkbox"/> Fee Transmittal Form
<input type="checkbox"/> Check Attached
<input type="checkbox"/> Copy of Fee Transmittal Form

<input type="checkbox"/> Amendment/Response
<input type="checkbox"/> Preliminary
<input type="checkbox"/> After Final
<input type="checkbox"/> Affidavits/declaration(s)
<input type="checkbox"/> Letter to Official Draftsperson
including Drawings
[Total Sheets ____]

<input type="checkbox"/> Petition for Extension of Time

<input type="checkbox"/> Information Disclosure Statement
<input type="checkbox"/> Form PTO-1449
<input type="checkbox"/> Copies of IDS Citations

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<input type="checkbox"/> Statement verifying identity of above | <input type="checkbox"/> Copy of Notice to File Missing Parts of Application

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<input type="checkbox"/> Request For Continued Examination (RCE) Transmittal

<input type="checkbox"/> Power of Attorney (Revocation of Prior Powers)

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<input type="checkbox"/> Small Entity Statement

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<input type="checkbox"/> Appeal Brief (in triplicate)

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Respectfully submitted,

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